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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/003,938	10/31/2001	William B. Connors	10007153-1	4722
75	90 04/07/2003			
HEWLETT-PACKARD COMPANY Intellectual Property Administration P.O. Box 272400			EXAMINER	
			NGUYEN, JUDY	
Fort Collins, CO 80527-2400			ART UNIT	PAPER NUMBER
		•	2861	
			DATE MAILED: 04/07/2003	

Please find below and/or attached an Office communication concerning this application or proceeding.

	Application.	Applicant(s)
Intervi w Summary	10/003,938	CONNORS ET AL.
intervi w Summary	Examiner	Art Unit
	Judy Nguyen	2861
All participants (applicant, applicant's representative,	PTO personnel):	
(1) <u>Judy Nguyen</u> .	(3)	
(2) Mr. Edmond DeFrank.	(4)	
Date of Interview: <u>04 April 2003</u>		
Type: a)⊠ Telephonic b)⊡ Video Conference c)⊡ Personal [copy given to: 1)⊡ applica		entative]
Exhibit shown or demonstration conducted: d) Your Young If Yes, brief description:	es e)∐ No.	
Claim(s) discussed:		
Identification of prior art discussed:		
Agreement with respect to the claims f) was read	hed. g)∏ was not reached	. h)⊠ N/A.
Substance of Interview including description of the ge reached, or any other comments: <u>Applicant's representation</u>	eneral nature of what was agreentative and the examiner disc	eed to if an agreement was cussed the issues of 112 for
(A fuller description, if necessary, and a copy of the a allowable, if available, must be attached. Also, where allowable is available, a summary thereof must be att	no copy of the amendments	ner agreed would render the claims that would render the claims
i)⊠ It is not necessary for applicant to provide checked).	e a separate record of the sub	estance of the interview(if box is
Unless the paragraph above has been checked, THE MUST INCLUDE THE SUBSTANCE OF THE INTER action has already been filed, APPLICANT IS GIVEN STATEMENT OF THE SUBSTANCE OF THE INTER reverse side or on attached sheet.	VIEW. (See MPEP Section 7 ONE MONTH FROM THIS IN	13.04). If a reply to the last Office ITERVIEW DATE TO FILE A
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	JU	ly Mauyen DY NGUYEN ARY EXAMINER
Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.	Examiner's	s signature, if required